

MOBILE VENDOR PERMIT APPLICATION
Town of Placentia

Applicant: _____

Proposed Business Name: _____

Mailing Address: _____

Civic Address: _____ Phone # _____

Service Area: _____

Please Provide a Brief Description of Business:

Duration of Business - Please indicate one of the following:

Monthly Specify: _____

Seasonal Indicate time frame: _____

Annual (6 Months or More)

Please note: Mobile Vendor fee is currently \$50.00/month to the maximum of current minimum business tax per annum. Fee must be paid prior to processing of application.

Comments: _____

Signed: _____

Accepted by: _____

Date: _____

Receipt #: _____

PUBLIC WORKS APPROVAL _____

DEPARTMENT APPROVAL _____

PERMIT # ISSUED _____ **DATE:** _____ **INT'L** _____

June 2003